



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Division of Medical Assistance
600 Washington Street
Boston, MA 02111
www.mass.gov/dma

Eligibility Operations Memo 02-16
November 1, 2002

TO: MassHealth Eligibility Operations Staff

FROM: Russ Kulp, Assistant Commissioner, Member Services

A handwritten signature in dark ink, appearing to read "Russell C. Kulp".

RE: **Average Cost for Nursing Facility Services**

Introduction

In accordance with 130 CMR 520.019(G)(1), the Division must impose a period of ineligibility for payment of nursing facility services when it has determined that a MassHealth applicant or member has made a disqualifying transfer of resources.

When calculating the period of ineligibility, the Division uses the average cost to a patient paying privately for nursing facility services in the Commonwealth. Periodically, this figure is revised to reflect increased costs.

Revised Average Cost for Nursing Facility Services

On August 29, 2002, the average cost to a patient paying privately for nursing facility services in the Commonwealth increased from \$181 a day to \$203 a day.

Effective November 1, 2002, the average cost to a patient paying privately for nursing facility services in the Commonwealth increased from \$203 a day to **\$214** a day. The **date** the Division **receives** the application or eligibility review form determines which of the following amounts to use when calculating the period of ineligibility for a disqualifying transfer of resources.

- Received before November 1, 2002 – use \$203
- Received on or after November 1, 2002 – use \$214

Questions

If you have any questions about this memo, please have your MEC designee contact the MassHealth Policy Hotline at 617-210-5331.
